



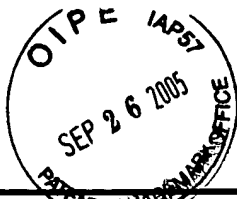
JFW

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application No.	10/729,683
		Filing Date	December 4, 2003
		First Named Inventor	Mikhail Vilyamovich Yarinich
		Art Unit	3711
		Examiner Name	Layno, Benjamin
Total Number of Pages in This Submission	14	Attorney Docket Number	4333P011

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Response  <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> PTO/SB/08  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">RETURN RECEIPT POSTCARD</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Steven Laut, Reg. No. 47,736 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	September 22, 2005

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.			
Typed or printed name	Jean Svoboda		
Signature		Date	September 22, 2005



# FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

Complete if Known

Application Number	10/729,683
Filing Date	December 4, 2003
First Named Inventor	Mikhail Vilyamovich Yarinich
Examiner Name	Layno, Benjamin
Art Unit	3711
Attorney Docket No.	4333P011

☒ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$ ) 0.00

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. ☒ Credit any overpayments

## FEE CALCULATION

### 1. EXTRA CLAIM FEES

	Extra Claims	Fee from below	Fee Paid
Total Claims	1	20**	0
Independent Claims	1	3**	0
Multiple Dependent			
Large Entity	Fee Code	Fee (\$)	Fee Description
Small Entity	Fee Code	Fee (\$)	
1202	50	2202	25 Claims in excess of 20
1201	200	2201	100 Independent claims in excess of 3
1203	360	2203	180 Multiple Dependent claim, if not paid
1204	300	2204	150 **Reissue independent claims over original patent
1205	300	2205	150 **Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)		(\$ )	0.00

\*\*or number previously paid, if greater, For Reissues, see below

### 2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	Fee (\$)
1051	130	2051 65 Surcharge - late filing fee or oath
1052	50	2052 25 Surcharge - late provisional filing fee or cover sheet.
2053	130	2053 130 Non-English specification
1251	120	2251 60 Extension for reply within first month
1252	450	2252 225 Extension for reply within second month
1253	1,020	2253 510 Extension for reply within third month
1254	1,590	2254 795 Extension for reply within fourth month
1255	2,160	2255 1,080 Extension for reply within fifth month
1401	500	2401 250 Notice of Appeal
1402	500	2402 250 Filing a brief in support of an appeal
1403	1,000	2403 500 Request for oral hearing
1451	1,510	2451 1,510 Petition to institute a public use proceeding
1460	130	2460 130 Petitions to the Commissioner
1807	50	1807 50 Processing fee under 37 CFR 1.17(q)
1806	180	1806 180 Submission of Information Disclosure Stmt
1809	790	1809 395 Filing a submission after final rejection (37 CFR § 1.129(a))
1810	790	2810 395 For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify)

SUBTOTAL (2)

Fee Paid

(\$ )

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Steven Laut	Registration No. (Attorney/Agent)	47,736	Telephone	(310) 207-3800
Signature		Date	09/22/05		



Attorney's Docket No.: 004333.P011

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application for:

**MIKHAIL VILYAMOVICH YARINICH**

Serial No.: 10/729,683

Filed: December 4, 2003

For: **METHOD OF PLAYING CARD  
GAMES**

Examiner: Layno, Benjamin

Art Group: 3711

**AMENDMENT AND RESPONSE TO OFFICE ACTION**

Mail Stop Amendment  
Commissioner for Patents  
Post Office Box 1450  
Alexandria, Virginia 22313-1450

Sir:

In response to the Office Action mailed June 23, 2005, regarding the above-referenced application, Applicant respectfully requests entry of the amendment set forth below and consideration of the remarks that follow.